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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below. 4603 Eleventh Street Jubbock, TX 79416 DAKED) (Depositor's na (Sie (Det APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/774,978 -01/31/2001 L. Todd Ramsey 6039 TITLE OF INVENTION: ENHANCED DRYER-CLEANER COMBINATION AND PROCESS FOR COTTON GINS **TOTAL CLAIMS** APPLN. TYPE SMALL ENTITY **ISSUE FEE** PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional YES \$640 \$300 \$940 06/20/2002 EXAMINER ART UNIT CLASS-SUBCLASS WELCH, GARY L 019-039000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required. 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name ☐ "Fee Address" indication (or "Fee Address" Indication form is listed, no name will be printed. PTO/SB/47) attached. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) KIMBELL GIN MACHINERY COMPANY LUBBOOK, TEXAS 29409 Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ individual ☐ corporation or other private group entity ☐ government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. 🚅 Issue Fee ☐ Payment by credit card. Form PTO-2038 is attached. Publication Fee ☐ The Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number ______(enclose an extra copy of this form). ☐ Advance Order - # of Copies The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application dentified above. (Authoriz#d/Signature) (Date) NOTE; The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest a shown by the records of the United States Patent and Trademark Office. or other party in 05/15/2002 CCHAU2 Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, United States Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for Patents, Washington, D.C. 20231 00000096 09774978 01 FC:242

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